

## County of Los Angeles DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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September 8, 2015

To:

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From:

Philip L. Browning

Director

## WEST COVINA FOSTER FAMILY AGENCY DBA HOMES OF HOPE FOSTER FAMILY AGENCY CONTRACT COMPLIANCE REVIEW

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a review of West Covina Foster Family Agency dba Homes of Hope (the FFA) in March 2014. The FFA has one licensed office in the First Supervisorial District and provides services to DCFS placed children. According to the FFA's program statement, its mission is "To ensure children are provided with a continuity of care, nurturance and services that will meet their needs and those of their families as prescribed by their Needs and Services Plans. A secondary goal is the achievement of legal permanency for children. When family reunification has been determined by the court and the placing agency is no longer a viable option and a child's case goals have been determined to be the achievement of legal permanency through adoption or guardianship, the agency will make every effort to achieve these goals."

At the time of the review, the FFA supervised 130 DCFS placed children in 39 Certified Foster Homes (CFHs). The placed children's average length of placement was 44 months and their average age was 15.

### **SUMMARY**

During CAD's contract compliance review, the interviewed children generally reported: feeling safe at the FFA CFHs; having been provided with good care and appropriate services; being comfortable in their environment and treated with respect and dignity. The Certified Foster Parents (CFPs) reported they were supported by the FFA staff in their efforts to provide care, supervision, and service delivery to the children placed in their homes.

The FFA was in full compliance with 4 of 11 sections of our contract compliance review: Certified Foster Homes; Health and Medical Needs; Psychotropic Medication; and Discharged Children.

CAD noted deficiencies in the areas of: Licensure/Contract Requirements, related to Special Incident Reports (SIRs) not being timely, and runaway procedures not in accordance with the contract requirements; Facility and Environment, related to exterior grounds, common areas, and children's

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bedrooms not being well maintained, not having sufficient and appropriate educational resources, not having adequate perishable and non-perishable foods and not having comprehensive monetary and clothing allowance logs; Maintenance of Required Documentation and Service Delivery, related to CFPs not participating in the development of the Needs and Services Plans (NSP), children not progressing toward meeting NSP goals, initial and updated NSPs not being developed timely, County Children's Social Workers were not contacted monthly and not having comprehensive and timely quarterly reports; Education and Workforce Readiness, related to report cards not being maintained and not having an increasing children's academic performance; Personal Rights and Social/Emotional Well-Being, related to age-appropriate children not being made aware of their right to receive or reject voluntary medical, dental, and psychiatric care; Personal Needs/Survival and Economic Well-Being, related to the quantity and quality of children's on-going clothing inventory, not providing weekly monetary allowances, age-appropriate children not allowed to manage their allowance and children not encouraged and assisted in maintaining a Life Book/Photo Album; and Personnel Records, related to staff not meeting the education/experience requirements.

Attached are the details of our review.

#### **REVIEW OF REPORT**

On May 16, 2014, Sherry L. Rolls, DCFS CAD, held an Exit Conference with West Covina Foster Family dba Homes of Hope: Sukhwinder Singh, Executive Director, and Dr. Pritpal Sidhu, Director. DCFS CAD staff included: Diana Flaggs, Amy Kim, and Rosalind Arrington. The FFA's representatives were in agreement with the review findings and recommendations; were receptive to implementing systematic changes to improve their compliance with regulatory standards; and to address the noted deficiencies in a Corrective Action Plan (CAP).

A copy of this compliance report has been sent to the Auditor-Controller and Community Care Licensing Division.

The FFA provided the attached approved CAP addressing the recommendations noted in this compliance report. CAD conducted a follow-up visit to the FFA on December 9, 2014, to verify implementation of the CAP.

If you have any questions, you may contact Aldo Marin, Board Relations Manager at (213) 351-5530.

PLB:EM LTI:slr

#### **Attachments**

c: Sachi A. Hamai, Interim Chief Executive Officer
John Naimo, Auditor-Controller
Public Information Office
Audit Committee
Sukhwinder Singh, Executive Director, West Covina Foster Family Agency dba Homes of Hope Lenora Scott, Regional Manager, Community Care Licensing Division
Lajuanna Hills, Regional Manager, Community Care Licensing Division

## WEST COVINA FOSTER FAMILY AGENCY DBA HOMES OF HOPE CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

### 1107 Glendora Avenue West Covina, California 91790 License No: 197803171

	CONTRACT COMPLIANCE MONITORING REVIEW	FINDINGS: MARCH 2014
1	Licensure/Contract Requirements (7 Elements)	
	<ol> <li>Timely Notification for Child's Relocation</li> <li>Timely, Cross-Reported SIRs</li> <li>Runaway Procedures in Accordance with the Contract</li> <li>Are there CCL Citations/OHCMD Safety Reports</li> <li>If Applicable, FFA Ensures Complete Required Whole Foster Family Home Training</li> <li>FFA Pays Certified Foster Parents (CFP) Whole Foster Family Home Payments</li> <li>FFA Conducts an Assessment of CFP Prior to Placement of Two (2) or More Children</li> </ol>	<ol> <li>Full Compliance</li> <li>Needs Improvement</li> <li>Needs Improvement</li> <li>Full Compliance</li> <li>Not Applicable</li> <li>Not Applicable</li> <li>Full Compliance</li> </ol>
II	Certified Foster Homes (CFHs) (12 Elements)	
	<ol> <li>Home Study and Safety Inspection Conducted Prior to Certification</li> <li>Agency's Inquiry with OHCMD for Historical Information Prior to Certification</li> <li>Timely, Criminal Clearances (DOJ, FBI, CACI) Prior to Certification</li> <li>Timely, Completed, Signed Criminal Background Statement</li> <li>Health Screening &amp; TB Test Prior to Certification</li> <li>All Required Training Prior to Certification</li> <li>Certificate of Approval on File/Including Capacity</li> <li>Safety Inspection Completed At Least Every Six Months or Per-Approved Program Statement</li> <li>Completed Annual Training Hours for Re-certification and Current CPR/First-Aid/Water Safety Certificates</li> <li>Current CDL/Auto Insurance/Annual Vehicle Maintenance Documentation for CFPs and Designated Drivers</li> <li>Criminal Clearances and Health Screening/CDL/CPR/DOJ/FBI/CACI/Auto Insurance for Other Adults in the Home</li> <li>FFA Assists CFPs in Providing Transportation Needs</li> </ol>	Full Compliance (All)

111	Facility and Environment (7 Elements)		
	<ol> <li>Exterior/Grounds Well Maintained</li> <li>Common Areas/Interior Well Maintained</li> <li>Children's Bedrooms/Interior Well Maintained</li> <li>Sufficient and Appropriate Educational Resources</li> <li>Adequate Perishable and Non-Perishable Food</li> <li>CFP Conducted Disaster Drills and Documentation Maintained</li> <li>Money and Clothing Allowance Logs Maintained</li> </ol>	2. 3. 4. 5. 6.	Needs Improvement Needs Improvement Needs Improvement Needs Improvement Needs Improvement Full Compliance
IV	Maintenance of Required Documentation/Service Delivery (10 Elements)		
	FFA Obtains or Documents Efforts to Obtain County     Children's Social Worker's (CSW) Authorization to Implement     NSPs	1.	Full Compliance
	<ul><li>2. CFPs Participated in Development of the NSPs</li><li>3. Children Progressing Towards Meeting NSP Goals</li></ul>	2.	Needs Improvement
	4. FFA Social Workers Develop Timely, Comprehensive Initial		Needs Improvement Needs Improvement
	NSP with Child's Participation  5. FFA Social Workers Develop Timely, Comprehensive	5.	Needs Improvement
	Updated NSPs with Child's Participation  6. Therapeutic Services Received	6.	Full Compliance
	<ul><li>7. Recommended Assessments/Evaluations Implemented</li><li>8. County Children's Social Workers Monthly Contacts</li></ul>		Full Compliance Needs Improvement
	Documented in Child's Case File		·
	<ol><li>FFA Social Workers Develop Timely, Comprehensive Quarterly Reports</li></ol>	9.	Needs Improvement
	10. FFA Social Workers Conduct Required Visits	10.	Full Compliance
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V	Education and Workforce Readiness (5 Elements)		
	<ol> <li>Children Enrolled in School Within Three School Days</li> <li>Children Attend School as Required and FFA Facilitates in Meeting Children's Educational Goals</li> </ol>	I	Full Compliance Full Compliance
	3. Current Children's Report Cards Maintained	ı	Needs Improvement
	4. Children's Academic Performance and/or Attendance Increased	4.	Needs Improvement
	<ol><li>FFA Facilitates Child's Participation in YDS or Equivalent Services and Vocational Programs.</li></ol>	5.	Full Compliance

VI	Health and Medical Needs (4 Elements)	
	1. Initial Medical Exams Conducted Timely	Full Compliance (All)
	2. Follow-Up Medical Exams Conducted Timely	
	<ul><li>3. Initial Dental Exams Conducted Timely</li><li>4. Follow-Up Dental Exams Conducted Timely</li></ul>	
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VII	Psychotropic Medication (2 Elements)	
	1. Current Court Authorization for Administration of Psychotropic	Full Compliance (All)
	Medication	, , ,
	2. Current Psychiatric Evaluation Review	
VIII	Personal Rights and Social/Emotional Well-Being	
	(10 Elements)	
	Children Informed of Agency's Policies and Procedures	1. Full Compliance
	2. Children Feel Safe in the CFP Home	2. Full Compliance
2	3. CFPs' Efforts to Provide Nutritious Meals and Snacks	3. Full Compliance
	4. CFPs Treat Children with Respect and Dignity	4. Full Compliance
	5. Children Allowed Private Visits, Calls and to Receive Correspondence	5. Full Compliance
	6. Children Free to Attend or Not Attend Religious	6. Full Compliance
	Services/Activities of Their Choice	·
	7. Children 's Chores Reasonable	7. Full Compliance
	8. Children Informed About Their Medication and Right to Refuse Medication	8. Full Compliance
	Shildren Aware of Right to Refuse or Receive Medical,	9. Needs Improvement
	Dental and Psychiatric Care	•
	10. Children Given Opportunities to Participate in Extra-Curricular	10. Full Compliance
	Activities, Enrichment and Social Activities	
IX	Personal Needs/Survival and Economic Well-Being	
	(7 Elements)	
	Clothing Allowance Provided in Accordance with FFA	1. Full Compliance
	Program Statement	•
	2. On-going Clothing Inventories of Adequate Quantity and	2. Needs Improvement
	Quality 3. Children's Involvement in Selection of Their Clothing	3. Full Compliance
	4. Provision of Sufficient Supply of Clean Towels and Personal	4. Full Compliance
	Care Items Meeting Ethnic Needs	
	5. Minimum Weekly Monetary Allowances	5. Needs Improvement
	6. Management of Allowance/Earnings	6. Needs Improvement
	7. Encouragement/Assistance with Life Book/Photo Album	7. Needs Improvement

X	<u>Discharged Children</u> (3 Elements)	
	<ol> <li>Completed Discharge Summary</li> <li>Attempts to Stabilize Children's Placement</li> <li>Child Completed High School (if applicable)</li> </ol>	Full Compliance (All)
XI	Personnel Records (9 Elements)	
	<ol> <li>Criminal Clearances (DOJ, FBI, CACI) Signed and Submitted Timely</li> <li>Timely, Completed, Signed Criminal Background Statement</li> <li>FFA Social Workers Met Education/Experience Requirements</li> <li>Timely Employee Health Screening/TB Clearances</li> <li>Valid CDL and Auto Insurance</li> <li>FFA Employees Signed Copies of FFA Policies and Procedures</li> <li>FFA Employees Completed All Required Training and Documentation Maintained</li> <li>FFA Social Workers Have Appropriate Caseload Ratio</li> <li>FFA Maintained Written Declarations for Part-Time Contracted FFA Social Workers Caseloads Not to Exceed a Total of 15 Children</li> </ol>	<ol> <li>Full Compliance</li> <li>Full Compliance</li> <li>Needs Improvement</li> <li>Full Compliance</li> </ol>

# WEST COVINA FOSTER FAMILY AGENCY DBA HOMES OF HOPE CONTRACT COMPLIANCE MONITORING REVIEW FISCAL YEAR 2013-2014

### **SCOPE OF REVIEW**

The following report is based on a "point in time" monitoring visit. This compliance report addresses findings noted during the March 2014 review. The purpose of this review was to assess West Covina Foster Family Agency dba Homes of Hope's (the FFA's) compliance with the County contract and State regulations, and included a review of the FFA's program statement, as well as internal administrative policies and procedures. The monitoring review covered the following 11 areas:

- Licensure/Contract Requirements,
- Certified Foster Homes,
- Facility and Environment.
- Maintenance of Required Documentation and Service Delivery.
- Educational and Workforce Readiness,
- Health and Medical Needs.
- Psychotropic Medications,
- Personal Rights and Social/Emotional Well-Being,
- Personal Needs/Survival and Economic Well-Being,
- Discharged Children, and
- Personnel Records.

For the purpose of this review, 12 placed children were selected for the sample. The Contracts Administration Division (CAD) interviewed each child and reviewed their case files to assess the care and services they received. Additionally, 4 discharged children's files were reviewed to assess the FFA's compliance with permanency efforts. At the time of the review, 3 placed children were prescribed psychotropic medications. Their case files were reviewed to assess for timeliness of Psychotropic Medication Authorizations and to confirm the required documentation of psychiatric monitoring.

CAD reviewed 3 Certified Foster Parent (CFP) files and 27 FFA staff files for compliance with Title 22 regulations and County contract requirements. Interviews were conducted with 3 CFPs to assess the quality of care and supervision provided to the children.

### **CONTRACTUAL COMPLIANCE**

CAD found the following areas out of compliance.

### **Licensure/Contract Requirements**

Special Incident Reports (SIRs) were not timely.

A review of 45 SIRs revealed that 3 were not submitted timely into the I-Track database. A SIR related to "Self Injurious Behavior" that took place on March 9, 2013, was submitted on March 12, 2013. A SIR related to an incident of "Inappropriate Sexual Behavior" that took place

on June 23, 2013, was submitted on June 25, 2013. A SIR related to "Assaultive Behavior (Peer)" incident took place on April 22, 2014, was submitted on April 24, 2014.

The FFA's runaway procedures were not in accordance with the contract.

CAD reviewed the FFA's runaway procedures and found that it was not in compliance with the requirement to keep all copies of reports and documentation for at least six months.

During the Exit Conference the FFA representatives stated they would revise their procedures to include the contract requirement to maintain all runaway files for a minimum of six months. On March 26, 2014 the FFA submitted new runaway procedures that were in compliance with the contract.

### Recommendations:

The FFA's management shall ensure that:

- 1. SIRs are cross-reported timely.
- 2. Maintain runaway procedures in accordance with the contract.

### Facility and Environment

• The exteriors were not well maintained.

Two Certified Foster Homes (CFHs) had exteriors that were not well maintained. CFH #1 had exposed building materials in the backyard. These materials were removed the same day. CFH #3 had a shed with broken doors on the side of the home. The CFPs stated they are unable to re-attach the doors back to the railing. On April 7, 2014, CAD confirmed the shed had been removed from the home.

Common areas/interiors were not well maintained.

In CFH #3, there was a broken vent fan in a restroom, several blown out light bulbs in the same restroom and one smoke detector was not functional. This smoke detector was repaired the same day. In CFH #2, there were several inoperable smoke detectors. The CFP was alerted to this issue and the smoke detectors were repaired the same day.

Children's bedroom was not well maintained.

One of the children's bedrooms in CFH #1 did not have sufficient lighting. CAD confirmed that sufficient lighting in the bedroom was made available on the same day the home was reviewed.

Sufficient and appropriate educational materials were not maintained.

CFH #3 did not maintain a sufficient and appropriate quantity and quality of educational resources. On May 27, 2014, CAD confirmed the CFH had sufficient and appropriate quantity and quality of educational resources, including a computer.

Adequate perishable and non-perishable foods were not maintained.

CFHs #1 and #3 did not maintain perishable and non-perishable foods. CAD immediately had the CFPs discard the expired items.

Appropriate monetary and clothing allowance logs were not maintained.

In Home #3, it was noted during a child's interview that a CFP was deducting over one half of the weekly allowance for two children to pay for annual amusement park passes. These deductions were not noted in the allowance logs. This finding was brought to the FFA's attention at the Exit Conference. On June 20, 2014, the FFA had the CFP sign the "Affidavit of Understanding" to ensure the CFP is aware of the correct use of children's allowance.

On December 9, 2014, CAD followed-up and reviewed records confirming that CFPs adhere to the County's contract and FFA's Program Statement regarding weekly allowances.

### **Recommendations:**

The FFA's management shall ensure that:

- 3. Exterior/grounds are well maintained.
- 4. Common areas/interior are well maintained.
- 5. Children's bedrooms are well maintained.
- 6. Sufficient and appropriate educational resources are maintained.
- 7. Adequate perishable and non-perishable foods are maintained.
- 8. Appropriate money and clothing allowance logs maintained.

### Maintenance of Required Documentation and Service Delivery

• A certified foster parent did not participate in the development of an updated Needs and Services Plan (NSP).

A review of five NSPs revealed that one NSP, dated February 26, 2014, was not signed by the CFP. Therefore, CAD was unable to verify that the CFP's participated in the development of the NSP.

A child was not progressing toward meeting the NSP goals.

For one child, two of five NSPs did not indicate that the child was progressing towards meeting the NSP goals. The Achieved Outcome page was not comprehensive nor completed for these two NSPs. The goals listed on the NSP dated October 1, 2013, were not listed on the subsequent NSP dated January 1, 2014.

An initial NSP was not developed timely.

CAD noted that one initial NSP was signed late. The NSP was due September 26, 2010 and signatures were obtained on October 4, 2010 and October 5, 2010.

An updated NSP was not developed timely.

A review of five NSPs revealed that for one NSP, the participants signed but it did not have the date of the signatures. Therefore, CAD was unable to verity if the NSP was timely.

 County Children's Social Worker's (CSW) monthly contacts were not documented in the child's case file.

For one child, five of five NSPs reviewed did not include the dates when the CSW was contacted. For another child, one of five NSPs reviewed did not note when the CSW was contacted for each month during that quarter.

A quarterly report was not completed timely or comprehensively.

The FFA did not sign off on one child's quarterly report; all the other quarterly reports were signed by the FFA.

CAD conducted a follow-up on December 9, 2014 and confirmed that on May 17, 2014, the FFA held an NSP training for its social workers. Specifically, they received training on Goals, Title 22 regulations, DCFS contract guidelines, requirements for CFP's participation in the development of the NSP, obtaining the signatures of the CSW on the NSP and how FFA's social workers and supervisors are to ensure that the CFPs participate in the development of the NSP and ensure that NSPs are properly signed and dated. Also, on June 20, 2014, the FFA held a mandatory training for all CFPs, which included a review of Title 22 regulations.

### **Recommendations:**

The FFA's management shall ensure that:

- 9. CFPs participate in the development of NSPs.
- 10. Children are progressing toward meeting their NSP goals.
- 11. FFA social workers develop timely initial NSPs.
- 12. FFA social workers develop timely updated NSPs.

- 13. CSW's monthly contacts are documented in each child's case file.
- 14. FFA social workers develop timely quarterly reports.

### **Education and Workforce Readiness**

- Current copy of a child's report card was not maintained.
- Academic performance and/or attendance did not increase.

A semester report card was missing from one of the children's files. Four of the children's report cards showed a decline in grades during this reporting period. There was no documentation in the case files of the FFA's attempts to support the children's academic performance.

On December 9, 2014, CAD followed up and confirmed that on May 17, 2014, the FFA social workers received training on the educational needs of children in placement, as well as training to enable them to: closely monitor and assess the educational needs and progress of the children; help CFPs find resources for any tutoring services or guidance needed for the educational advancement of the children; and to closely monitor the educational progress of the children by ensuring that all needed services (tutoring, meetings or contacts with the school counselors and mental health services) are provided to the children during the weekly supervision.

### **Recommendations:**

The FFA's management shall ensure that:

- 15. Current report cards are maintained in child's file.
- 16. Children's academic performance and/or attendance increases.

### Personal Rights and Social/Emotional Well-Being

 A child was not aware of their right to receive or reject voluntary medical, dental and psychiatric care.

During an interview with an age-appropriate child, CAD was informed that they were not aware of their right to refuse voluntary medical, dental, and psychiatric care.

On December 9, 2014, CAD followed-up and confirmed the FFA had enhanced their intake policy by amending their "Client Orientation to FFA, Policy & Procedure Acknowledgment" by adding the following language: "children are free to receive and reject voluntary medical, dental and psychiatric care."

### **Recommendation:**

The FFA's management shall ensure that:

17. Children are aware of their right to refuse medical, dental and psychiatric care.

### Personal Needs/Survival and Economic Well-Being

- A child's clothing inventory was not of adequate quantity or quality.
- A child's clothing allowance amount was not provided.

One age-appropriate child did not have an adequate supply of clothes and was unaware of the monthly clothing allowance at the time of the review. The CFP stated it was their belief that the monthly allowance went to the child's previous placement and that the FFA would forward the monthly allowance the following month after placement.

On December 9, 2014, CAD followed up and confirmed that on June 16, 2014, the FFA implemented a new CFP process whereby the CFP and child conduct initial 6 month clothing inventories and the documentation is filed in the child's case file. In addition, the FFA updated their intake process to include informing each newly placed child about their weekly and clothing allowances.

Two age-appropriate children were not free to manage their allowances.

During two child interviews, it was noted that the CFP was deducting a portion of their weekly allowance to pay for amusement park tickets.

On December 9, 2014, CAD followed-up and confirmed that on June 20, 2014, the FFA had this CFP acknowledge and confirm acceptance of the County's contract and FFA Program Statement policy by signing the "Affidavit of Understanding," which specifies the correct use of children's allowance.

• Encouragement and assistance with Life Book/Photo Album not provided.

One child did not have a Life Book/Photo Album. The CFP stated that the child destroys the book, so the child is to share with an older sibling in the home. The older sibling was not aware of the arrangement for them to share.

On December 9, 2014, CAD followed-up and confirmed the FFA held a June 6, 2014, mandatory training for CFPs, which included the topic of maintaining and updating Life Books on behalf of the children; what to do in the event the child refuses to do their own Life Book; and to document any refusals in the weekly progress summary report by the FFA's social worker.

### Recommendations:

The FFA's management shall ensure that:

- 18. On-going clothing inventories are of adequate quantity and quality.
- 19. Clothing allowances are provided to age-appropriate children.
- 20. Children are free to manage their allowance/earnings.
- 21. CFPs encourage and assist children to update a Life Book/Photo Album.

### **Personnel Records**

Staff did not meet the education/experience requirements.

Upon review of the personnel files, five social work staff members did not meet the education/experience requirements for the job classification. CAD informed the FFA of the need to get an exemption approval from Community Care Licensing (CCL) for the FFA social worker staff that did not meet the educational/experience requirements. The FFA contacted CCL for exemption approval for the five staff members and approval for all five was submitted to CAD by April 16, 2014.

### Recommendation:

The FFA's management shall ensure that:

22. FFA social workers meet educational/experience requirements.

## PRIOR YEAR FOLLOW-UP FROM DCFS OUT-OF-HOME CARE MANAGEMENT DIVISION (OHCMD) FOSTER FAMILY AGENCY CONTRACT COMPLIANCE MONITORING REVIEW

The OHCMD's last compliance report, dated August 7, 2013, identified one recommendation.

### **Results:**

Based on CAD's follow-up, the FFA did not implement the recommendation for which the FFA was to ensure that:

All children are assisted in maintaining a Life Book/Photo Album.

### **Recommendation:**

23. The outstanding recommendation from the monitoring report dated August 7, 2013, which is noted in this report as Recommendation number 21 is fully implemented.

At the Exit Conference, the FFA representatives stated their desire to remain in compliance with all Title 22 regulations and Contract requirements. The representatives were in agreement with the findings and will implement procedures to strive towards greater compliance. A follow-up visit was conducted December 9, 2014, by CAD and the FFA was advised to continue to implement their new protocols. CAD will continue to assess implementation of the recommendations during the next monitoring review. The OHCMD will continue to proved on-going technical assistance prior to the next review.

### MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER (A-C)

A fiscal review of the FFA has not been posted by the A-C.

next monitoring review. The OHCMD will continue to proved on-going technical assistance prior to the next review.

### MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER (A-C)

A fiscal review of the FFA has not been posted by the A-C.



## Homes of Hope Foster Family Agency

### 1-888-94-4-HOPE

Homes of Hope, F.F.A. 1107 S. Glendora Ave. West Covina, CA 91790 Phone: (626) 814-9085 Fax: (626) 814-2276 Facility License 197803171

June 16, 2014

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Members of:

West Covina Chamber of Commerce

California Association of Children's Homes

Facebook: Homes of Hope FFA Website: www.homesofhopeffa.com

Sherry L. Rolls,

Children's Services Administrator I
Department of Children and Family Services
Contracts Administration Division - Contracts Compliance Unit
3530 Wilshire Blvd. 4th Floor

Los Angeles, CA 90010

RE: Homes of Hope Foster Family Agency Monitoring Review Concluded- March 29, 2014 Corrective Action Plan

Dear Ms. Rolls:

In a continuing effort to diligently pursue and meet the goals and standards in partnership with the Department of Children and Family Services, it is the sincere intentions of Homes of Hope Foster Family Agency to meet those requirements fully and support the collaborative efforts to meet the needs of Los Angeles County's dependent children and provide quality care.

Following is the Plan of Correction for Homes of Hope FFA Monitoring Review that was conducted on March 26, 2014.

### I. LICENSURE/CONTRACT REQUIREMENTS:

Field Exit Review#3: The Agency Runaway Procedures do not include the SOW requirement from Part C-Services Tasks to achieve Outcome Goals, Section 1.0 Safety, subsection 1.7 Runaway Procedures requiring the agency to "Keep all of your copies of rep[orts and documentation for at least 6 months."

### **CORRECTIVE ACTION PLAN:**

• Homes of Hope Foster Family Agency has amended the program statement. Runaway procedures will be added to section 37 of the Program Statement. The Runaway procedures will include the SOW requirement from Part C-Services Tasks to achieve Outcome Goals, Section 1.0 Safety, subsection 1.4 Runaway Procedures requiring the agency to "Keep all of your copies of reports and documentation for at least 6 months." See Exhibit (A): RUNAWAY PROCEDURES SECTION - 37.

### II. CERTIFIED FOSTER HOMES:

Field Exit Review #9: Two CFP files did not contain the agency's inquiry with OHCMD for historical information prior to certification.

### CORRECTIVE ACTION PLAN:

- Three Certified Foster Parents (CFP) were selected for review by the auditors: CFP #1 CFP #2 and CFP #3
- Certified Foster Parent #1
   Was certified with Homes of Hope effective 03/31/2006 (prior to DCFS/ OHCMD requirement for history of investigation request effective November 1, 2008 for certification of foster parents).
- Certified Foster Parent #1

  Coincidentally her current partner

  has the same last name as well. After her divorce from her husband

  opted to restore her former name

  California Department of Motor Vehicle print out of her driver's license shows all the names that

  has used See Exhibit (B2):

  CALIFORNIA DEPARTMENT OF MOTOR VEHICLE DRIVER

  LICENSE/IDENTIFICATION INFORMATION PRINT OUT.
- Certified Foster Parent #2
   03/02/2007 (prior to DCFS/ OHCMD requirement for history of investigation request effective November 1, 2008 for certification of foster parents).
- Certified Foster Parents #3

  Homes of Hope effective 12/30/2011. To meet the requirement for history of investigation request from DCFS/OHCMD effective November 1, 2008, the agency requested History of Investigation from DCFS/OHCMD on May 19, 2011. History of Investigation for and was received by Homes of Hope on May 19, 2011 from DCFS/OHCMD prior to

## the certification date of 12/30/2011 See Exhibit (B3): REQUEST FOR HISTORY OF INVESTIGATION DATED MAY 19, 2011.

### III. FACILITY AND ENVIRONMENT

Field Exit Review #20

#20 -CFP#: Berningaes Backyard had exposed building materials. Monitor instructed CFP to have materials removed and covered up: FP complied on the same day. CFP# 2: On 04/2/14 observed unsafe shed on the side of the home in the driveway area to the left of the garage. The shed was hazardous; broken doors that were off the railing. By 4/7/14, shed had been removed from foster home.

### CORRECTIVE ACTION PLAN:

- Homes of Hope will complete a mandatory training for all the certified foster parents on June 20, 2014. This training will include review of Title 22 regulations regarding the physical plant compliance requirements. Certified foster parents will ensure that at all times any building materials will be immediately removed and or stored in a safe and secure area. Certified foster parents will ensure that at all times any broken sheds are either removed or fixed and the home is in compliance with Title 22 regulations.
- Homes of Hope has increased the frequency of Home Inspections, starting July 1, 2014, FFASW's will complete home inspections of their assigned certified homes every other month (bimonthly) to ensure compliance with Title 22 regulations regarding the physical plant compliance requirements. This bimonthly home inspection form will be filed in the file of the certified foster parents. In addition to the home inspections by the FFASW's FFA social worker supervisors will complete a home inspection once every 6 months (biyearly) to ensure compliance with Title 22 regulations regarding the physical plant compliance requirements. This biyearly home inspection form will be filed in the file of the certified foster parent.

### Field Exit Review #21

#21- CFP#1 dead geometric Fan in restroom not working. Several light bulbs in 2 bathrooms were out. Monitor instructed CFP to replace burnt out light bulbs. CFP complied on the same day. One smoke detector not working-CFP replaced batteries on the same day.

CFP#2-Several smoke detectors were not working. CFP replaced batteries on the same day.

### CORRECTIVE ACTION PLAN:

- Homes of Hope will complete a mandatory training for all the certified foster parents on June 20, 2014. This training will include review of Title 22 regulations regarding the physical plant compliance requirements. Certified foster parents will ensure that at all times all the fans in the bathroom are working, and all the smoke detectors will be fully working.
- Homes of Hope has increased the frequency of Home Inspections, starting July 1, 2014, FFASW's will complete home inspections of their assigned certified homes every other month (bimonthly) to ensure compliance with Title 22 regulations regarding the physical plant compliance requirements. This bimonthly home inspection form will be filed in the file of the certified foster parents. In addition to the home inspections by the FFASW's FEA social worker supervisors will complete a home inspection once every 6 months (biyearly) to ensure compliance with Title 22 regulations regarding the physical plant compliance requirements. This biyearly home inspection form will be filed in the file of the certified foster parent.

### Field Exit Review #22

#22- CFP#2 No sufficient lighting in one bedroom; light bulbs taken out of ceiling. CFP stated oldest client only wanted a lamp light. There was no light source for other client. CFP bought an additional lamp for bedroom on the same day.

### **CORRECTIVE ACTION PLAN:**

- Homes of Hope will complete a mandatory training for all the certified foster parents
  on June 20, 2014. This training will include review of Title 22 regulations regarding
  the physical plant compliance requirements. Certified foster parents will ensure that
  all the children's bedrooms are fully lighted, and will try to accommodate the light
  preference of each child sharing the bedroom without compromising the need for a
  light for the other child.
- Homes of Hope has increased the frequency of Home Inspections, starting July 1, 2014, FFASW's will complete home inspections of their assigned certified homes every other month (bimonthly) to ensure compliance with Title 22 regulations regarding the physical plant compliance requirements. This bimonthly home inspection form will be filed in the file of the certified foster parents. In addition to the home inspections by the FFASW's FFA social worker supervisors will complete a home inspection once every 6 months (biyearly) to ensure compliance with Title 22 regulations regarding the physical plant compliance requirements. This biyearly home inspection form will be filed in the file of the certified foster parent.

Field Exit Review #23: CFP#1 \*\*CFP\*\* no education resources found in the home (encyclopedia, etc). No computer in home; CFP states clients use smart phones to access internet; clients not having smart phones borrow from other clients to use the internet.

CFP#2 No computer in the home

### CORRECTIVE ACTION PLAN:

- Certified foster parent #1 has been utilizing the library that is around the corner from the certified foster home. Certified foster parent #1 and #2 have purchased computers for their homes on 05/21/14 that are available to all the children for their home work. Certified foster parents will also organize the resource books such as encyclopedias, dictionaries or other age appropriate educational resources in a centrally located place so that they are accessible to all the children in the home.
- Homes of Hope will complete a mandatory training for all certified foster parents on June 20, 2014. This training will include the requirement for educational resources such as computer availability, access to library and/or encyclopedias, dictionaries or other age appropriate educational resources.

### Field Exit Review #24

#24-CFP#1-DEMANCE SECTION -Several expired foods in pantry, CFP removed items on the same day.

CFP#2- Severa expired foods in pantry, CFP removed items on the same day. CORRECTIVE ACTION PLAN:

 Homes of Hope will complete a mandatory training for all the certified foster parents on June 20, 2014. This training will include review of Title 22 regulations regarding the physical plant compliance requirements. Certified foster parents will periodically go through their pantry to discard any expired food. • Homes of Hope has increased the frequency of Home Inspections, starting July 1, 2014, FFASW's will complete home inspections of their assigned certified homes every other month (bimonthly) to ensure compliance with Title 22 regulations regarding the physical plant compliance requirements. This bimonthly home inspection form will be filed in the file of the certified foster parents. In addition to the home inspections by the FFASW's FFA social worker supervisors will complete a home inspection once every 6 months (biyearly) to ensure compliance with Title 22 regulations regarding the physical plant compliance requirements. This biyearly home inspection form will be filed in the file of the certified foster parent.

Field Exit Review #26: CFP#2- keeps more than ½ of children's allowance to pay for annual passes to Knott's Berry Farm. Allowance log does not show this. Client file missing his August 2013 Weekly Allowance Form (\$3.75/week). CORRECTIVE ACTION PLAN:

- Every year CFP takes the children to Knott's Berry Farm. CFP buys the annual pass in summer for the trips to Knott's Berry Farm. For purchases this annual pass for the children with her own funds. Children in placement are encouraged by the foster mother to save a small portion of their weekly allowance to spend on the souvenir if they want to. This encouragement is part of teaching money management skills to children. See Exhibit (C1): STATEMENT BY THE CERTIFIED FOSTER PARENT SLALS. This year too children wanted to save \$2 a week for one month from their weekly allowance to buy souvenirs at Knott's Berry Farm. CFP did not use the appropriate form to document safeguarding the cash resources of children. CFP has been trained to use the appropriate form. See Exhibit (C2): RECORD OF CLIENT'S /RESIDENTS SAFEGUARDED CASH RESOURCES-LIC 405 FOR STREET OF SOME Also in future CFP will put each child's cash in a separate sealed envelope which will state the child's name on it and the amount the envelope contains. Each child will also sign the LIC 405-Record of Client's/Resident's Safeguarded Cash Resources. See Exhibit (C3): RECORD OF CLIENT'S /RESIDENTS SAFEGUARDED CASH RESOURCES-LIC405 FOR MERCEN SERVICE D.
- Certified Foster Parent has also signed an Affidavit of Understanding- stating that the CFP is aware that the clients' allowances are not to purchase annual passes to any park and will not be used for any other purposes. See Exhibit (C5): AFFIDAVIT OF UNDERSTANDING
- FFASW and FFASW supervisor will ensure that the foster parents use the
  appropriate form to document any savings of cash resources and in addition the
  reason for saving the money will be marked on the LIC 405 under the section labeled
  "Description".
- Due to intra agency transfer of minors and all in the month of August 2013, the weekly allowance log of August 2013 was misplaced. Prior CFP redid the weekly allowance of August 2013 and gave minor's money again on 05/29/14. See Exhibit (C4): HOMES OF HOPE FOSTER FAMILY AGENCY WEEKLY ALLOWANCE.
- The FFASW will ensure that weekly allowances are collected from the certified foster parents on a monthly basis and the FFASW supervisors will ensure that these monthly allowances are collected from the FFASW during weekly supervision and are given to the Quality Assurance department for filing. An internal document tracking system has been created by Homes of Hope to ensure that the exchange of such documents can be made as secure as possible.

### IV. MAINTENANCE OF REQUIRED DOCUMENTATION AND SERVICE DELIVERY

Field Exit Review #27: Dinitial NSP was not signed by CSW. CSW signed Ist quarter NSP but the FFA did not sign.

### **CORRECTIVE ACTION PLAN:**

As mentioned in our response to the Field Exit Summary dated 05/23/14, Initial NSP was signed by CSW. CSW signed the initial NSP and dated 12/15/13. The signature page was received from the CSW on 01/06/14. Please find attached the signature page of the Initial NSP with the date receipt stamped on the back of the Initial NSP signature page. See Exhibit (D1): SIGNATURE PAGE OF NSP DATED 12/15/13.

Field Exit Review #28: 400 April CFP Company did not sign current NSP dated 02/26/14

#### **CORRECTIVE ACTION PLAN:**

- On 05/17/14 FFASW's received training on Needs and Service Plan which covered
  Goals, Title 22/DCFS Contract Guidelines, requirement for foster parent participation
  in the planning of the NSP along with the signatures of the CSW on the NSP. See
  Exhibit (D2): MONTHLY SOCIAL WORK MEETING/TRAINING- MONTH
  OF MAY 21, 2014.
- The FFASWs and FFASW supervisors will ensure that foster parents participate in the planning of the Needs and Service Plan and the NSPs are properly signed and dated.

Field Exit Review #29: The Achieved Outcome Page is not completed. Alternate documentation not found in client file. On the 1/1/14 NSP, the goal was not listed. The outcome of the goals was not listed.

### **CORRECTIVE ACTION PLAN:**

- On 05/17/14 FFASW's received training on Needs and Service Plan which covered Goals, Title 22/DCFS Contract Guidelines, requirement for foster parent participation in the planning of the NSP along with the signatures of the CSW on the NSP. See Exhibit (D2): MONTHLY SOCIAL WORK MEETING/TRAINING-MONTH OF MAY 21, 2014.
- The FFASWs supervisors will ensure that the NSP goals are comprehensive and progress and achievement of the goals is documented in the Achieved Outcome Page of the Needs and Services Plan.

Field Exit Review #30: Part Initial NSP signed after 30 day period. Due 09/26/10, signed on 10/04 and 10/05. Part Initial NSP signed BEFORE actual date of review (pre-printed dates on signature page). As of date of review, CSW had not yet signed the initial NSP.

### **CORRECTIVE ACTION PLAN:**

- On 05/17/14 FFASW's received training on Needs and Service Plan which covered Goals, Title 22/DCFS Contract Guidelines, requirement for foster parent participation in the planning of the NSP along with the signatures of the CSW on the NSP. See Exhibit (D2): MONTHLY SOCIAL WORK MEETING/TRAINING-MONTH OF MAY 21, 2014.
- The FFASWs supervisors will ensure that the NSPs are signed with the correct dates.
   The Quality Assurance department of Homes of Hope will verify that the NSPs are

- correctly signed and dated before NSPs are faxed to the CSWs for their approval signatures.
- Initial NSP was signed by minor of the Field Exit Summary dated 05/27/14, Initial NSP was signed by minor of the Field Exit Summary dated 05/27/14, Initial NSP was signed by minor of the Field Exit Summary dated 05/27/14, Initial NSP was signed by minor of the Field Exit Summary dated 05/27/14, Initial NSP was signed by FFA social worker of FFA social worker of FFA social worker of FFA social worker of FFA administrator/supervisor of the CSW returned the signed and dated Initial NSP on 04/10/14 via fax. The dates on the Initial NSP for of the Initial NSP are hand written by all parties that signed the Initial NSP. Please see the attached signature page of the Initial NSP for of th

Field Exit Review #31: Signature are on current NSP but there are no dates on it.

### CORRECTIVE ACTION PLAN:

- On 05/17/14 FFASW's received training on Needs and Service Plan which covered Goals, Title 22/DCFS Contract Guidelines, requirement for foster parent participation in the planning of the NSP along with the signatures of the CSW on the NSP. See Exhibit (D2): MONTHLY SOCIAL WORK MEETING/TRAINING-MONTH OF MAY 21, 2014.
- The FFASWs supervisors will ensure that the NSPs are signed with the correct dates.
   The Quality Assurance department of Homes of Hope will verify that the NSPs are correctly signed and dated before NSPs are faxed to the CSWs for their approval signatures.

Field Exit Review #34: CSW not contacted in December 2013. Dates of County contacts not included in NSP. CSW contacted only once during quarter.

### CORRECTIVE ACTION PLAN:

- CSW was contacted in December 11, 2013. A copy of the email contact by FFA social worker Copy of the EMAIL FROM FFASW COPY OF THE EM
- CSWs are contacted on a monthly basis and as needed. The contacts with the CSW
  are documented in the weekly progress notes. FFASW supervisor will ensure that a
  copy of the email is attached to the weekly progress note and the Needs and Services
  Plan for that quarter.
- In the case of **County** of County contacts were not included in NSP. On 05/17/14 FFASW's received training on Needs and Service Plan which covered Goals, Title 22/DCFS Contract Guidelines, requirement for foster parent participation in the planning of the NSP along with the signatures of the CSW on the NSP. See Exhibit (D2): MONTHLY SOCIAL WORK MEETING/TRAINING-MONTH OF MAY 21, 2014.
- Homes of Hope FFASW's and social worker supervisors will ensure that County Social Workers are contacted on a monthly basis and that such contacts are appropriately documented in the weekly progress summary report and in the Needs and Services Plan.

Field Exit Review #35: The agency did not sign his quarterly NSP NOTE: Many of the NSP's had pre-printed dates o the signature pages.

### **CORRECTIVE ACTION PLAN:**

- On 05/17/14 FFASW's received training on Needs and Service Plan which covered Goals, Title 22/DCFS Contract Guidelines, requirement for foster parent participation in the planning of the NSP along with the signatures of the CSW on the NSP. See Exhibit (D2): MONTHLY SOCIAL WORK MEETING/TRAINING-MONTH OF MAY 21, 2014.
- The FFASWs supervisors will ensure that the NSPs are signed and dated by hand.
  The Quality Assurance department of Homes of Hope will verify that the NSPs are
  signed and dated by hand before NSPs are faxed to the CSWs for their approval
  signatures.

### V. EDUCATION AND WORKFORCE READINESS

Field Exit Review #39: Last report card on file dates 7/31/13. Common 1-6-14 enrolled in CARS (Common Elementary, CARS (Common 3-11-13 to 6-6-13. CORRECTIVE ACTION PLAN:

- Targette. As mentioned in our Field Exit Summary dated 05/27/14, Cargette. Graduated from high school on 07/26/13. A copy of her diploma was in the file at the time of the audit review. Please see her attached graduation diploma. See Exhibit (E1): 10224-11. HIGH SCHOOL WED OF COLOR COLOR. At the time of the audit review her final grades were filed in the case file. See Exhibit (E2): 1024-11. The case was transferred from Elementary School Section Unified School District) to 1024-11. Elementary School due to intra agency transfer of placement. Please see attached 11. In grade report from 11. Elementary School, (reporting period 1) and grade report from 11. Elementary School, (reporting period 2 & 3). See Exhibit E8 & E9: 12. Elementary School, (reporting Period 1 & 10. PARENTS-SIXTH GRADE-DOTAL Elementary School Reporting Period 1 & 10. Parentary School Reporting Period 2 & 3.
  - On 05/17/14 FFASW's received training on collecting the Report Cards.
     See Exhibit See Exhibit (D2): MONTHLY SOCIAL WORK
     MEETING/TRAINING- MONTH OF MAY 21, 2014.
  - During their weekly home visitation the FFASWs will collect the school report cards or progress report cards when they are made available to the certified foster parents. FFASW supervisors will ensure that during weekly supervision the school report cards or progress report cards are collected from the social workers when they are made available to the certified foster parents.

Field Exit Review #40: practice grades declined in last semester report card. CORRECTIVE ACTION PLAN:

- As mentioned in our Exit Field Summary response dated 05/27/14, according to Monitoring Review four children were found deficient in this area, however only one child is listed in the notation section (2005).
- has been enrolled and participating in the UCLA First Star program for the last three years. In the last three years.

reports and will allow them to drop, but towards the end of the semester when he knows that those grades will count he makes an extra effort and will usually bring them up. \*\*Sandards\*\* is on a Semester system, he has 2 quarters in one semester. Please see the attached Mid Quarter 1 Grades, Mid Quarter 2 Grades and Semester 1 Grades and Mid Quarter 2 Grades and Mid Quarter 3 grades. His Semester 2 grades are pending (to be received at the end of the Semester 2). See Exhibit (E3, E4, E5, E6, E7): MID QUARTER 1 GRADES, MID QUARTER 2 GRADES, SEMESTER 1 GRADES, MID QUARTER 3 GRADES, MID QUARTER 4 GRADES, SEMESTER 2 GRADES. Following is an example of his patterns in the last 5 Quarters:

Mld Quarter 1 Grades	Mid Quarter 2 Grades	Semester 1 Grades
Spanish=C+	Spanish=C-	Spanish=C
3D Design=A	3D Design=A-	3D Design=A-
US History=D-	US History=D	US History=C+
Prob & Stats=A	Prob & Stats=B-	Prob & Stats=C
Chemistry=D	Chemistry=F	Chemistry=D
English 3=A	English 3=F	English 3=D-
GPA= 2.6667	GPA=1.6667	GPA=2.0000
Mid Quarter 3 Grades	Mid Quarter 4 Grades	Semester 2 Grades
Spanish=B	Spanish=C-	Pending
3D Design=A+	3D Design=B	Pending
US History=C	US History=D+	Pending
Prob & Stats=F	Prob & Stats=F	Pending
Chemistry=F	Chemistry=D	Pending
English 3=F	English 3=D-	Pending
GPA= 1.5000	GPA=1.3333	Pending

On 05/17/14 FFASW's received training on the educational needs and failing grades of the children in placement. FFASW will closely monitor and assess the educational needs and progress of the children in placement. FFASW will help the foster parents find resources for any tutoring services or guidance needed for the educational advancement of the children. During weekly supervision, the FFASW supervisors will closely monitor the educational progress of the children by ensuring that all needed services (tutoring, meetings or contacts with the school counselors and mental health services) are provided to the children in placement.

### VI. PERSONAL RIGHTS AND SOCIAL/EMOTIONAL WELL-BEING

Field Exit Review #56: 92101/9 years old and not completely aware of his medical/dental rights. 12131112/does not know of medical rights to refuse care. CORRECTIVE ACTION PLAN:

• All newly placed children or children that are transferred from another certified home of Homes of Hope are provided with the CLIENT ORIENTATION TO F.F.A., POLICY & PROCEDURE ACKNOWLEDGEMENT and are required to sign it at the time of intake placement or transfer. Homes of Hope have amended the CLIENT ORIENTATION TO F.F.A., POLICY & PROCEDURE ACKNOWLEDGEMENT to add that children are free to receive and reject voluntary medical, dental and psychiatric care. See Exhibit (F1): CLIENT ORIENTATION TO F.F.A., POLICY & PROCEDURE ACKNOWLEDGEMENT.

#### IX. PERSONAL NEEDS/SURVIVAL AND ECONOMIC WELL-BEING

Field Exit Review #58: White unaware of clothing allowance. CORRECTIVE ACTION PLAN:

- During the certification training, the potential foster parents are informed about the expectation of providing children with monthly clothing allowance, weekly allowance and personal care items based on the need of the child. It is the expectation of Homes of Hope FFA that the certified foster parents will provide from their monthly reimbursement clothing, weekly allowance and personal care items based on the needs of the child. The FFA monitors certified foster homes for compliance with Title 22 regulations and policies and procedures that the agency has developed and periodically reviews/updates the minimum amounts that the children of different ages are to receive. Foster parents are to record and sign for the provision of the minimum amounts of allowance and the child is to sign that they received the allowance on a weekly or monthly basis. The FFASW, foster parent and the child will together do an initial and a 6 month clothing inventory. This clothing inventory will be filed in the child's file and a copy will be filed in the child file at the home of the certified foster parent.
- At the time of the intake placement, Homes of Hope will provide each newly placed child with the information regarding the amount of weekly allowance and clothing allowance that they will receive. Each child will sign the acknowledgement. See Exhibit (G1): ACKNOWLEDGEMENT OF WEEKLY ALLOWANCE AND CLOTHING ALLOWANCE.

Field Exit Review #59: does not have an adequate supply of clothes at the time of review. CFP states she believes the monthly allowance went to the group home she came from and believes the agency will forward her monthly allowance in April 2014. CORRECTIVE ACTION PLAN:

• During the certification training, the potential foster parents are informed about the expectation of providing children with monthly clothing allowance, weekly allowance and personal care items based on the need of the child. It is the expectation of Homes of Hope FFA that the certified foster parents will provide from their monthly reimbursement clothing, weekly allowance and personal care items based on the needs of the child. The FFA monitors certified foster homes for compliance with Title 22 regulations and policies and procedures that the agency has developed and periodically reviews/updates the minimum amounts that the children of different ages are to receive. Foster parents are to record and sign for the provision of the minimum amounts of allowance and the child is to sign that they received the allowance on a

- weekly or monthly basis. The FFASW, foster parent and the child will together do an initial and a 6 month clothing inventory. This clothing inventory will be filed in the child's file and a copy will be filed in the child file at the home of the certified foster parent.
- At the time of the intake placement, Homes of Hope will provide each newly placed child with the information regarding the amount of weekly allowance and clothing allowance that they will receive. Each child will sign the acknowledgement. See Exhibit (G1): ACKNOWLEDGEMENT OF WEEKLY ALLOWANCE AND CLOTHING ALLOWANCE.
- FFASW will collect the receipt for the clothing allowance on a monthly basis from
  the foster parents. During the weekly supervision the FFASW supervisors will ensure
  that the monthly clothing receipts are collected, verified and given to the Quality
  Assurance department so that the clothing receipts are filed in the file of the child.

Field Exit Review #60: \*\*Comparison At time of interview, client had not been taken shopping for her clothes

### **CORRECTIVE ACTION PLAN:**

- During the certification training, the potential foster parents are informed about the expectation of providing children with monthly clothing allowance, weekly allowance and personal care items based on the need of the child. It is the expectation of Homes of Hope FFA that the certified foster parents will provide from their monthly reimbursement clothing, weekly allowance and personal care items based on the needs of the child. The FFA monitors certified foster homes for compliance with Title 22 regulations and policies and procedures that the agency has developed and periodically reviews/updates the minimum amounts that the children of different ages are to receive. Foster parents are to record and sign for the provision of the minimum amounts of allowance and the child is to sign that they received the allowance on a weekly or monthly basis. The FFASW, foster parent and the child will together do an initial and a 6 month clothing inventory. This clothing inventory will be filed in the child's file and a copy will be filed in the child file at the home of the certified foster parent.
- At the time of the intake placement, Homes of Hope will provide each newly placed child with the information regarding the amount of weekly allowance and clothing allowance that they will receive. Each child will sign the acknowledgement. See Exhibit (G1): ACKNOWLEDGEMENT OF WEEKLY ALLOWANCE AND CLOTHING ALLOWANCE.
- FFASW will collect the receipt for the clothing allowance on a monthly basis from the foster parents. During the weekly supervision the FFASW supervisors will ensure that the monthly clothing receipts are collected, verified and given to the Quality Assurance department so that the clothing receipts are filed in the file of the child.

Field Exit Review #62: CFP deducts money from weekly allowance to pay for tickets to an amusement park.

### **CORRECTIVE ACTION PLAN:**

• Every year CFP takes the children to Knott's Berry Farm. CFP buys the annual pass in summer for the trips to Knott's Berry Farm. Less purchases this annual pass for the children with her own funds. Children in placement are encouraged by the foster mother to save a small portion of their weekly allowance to spend on the souvenir if they want to. This encouragement is part of teaching money management skills to children. See Exhibit (C1):

STATEMENT BY THE CERTIFIED FOSTER PARENT (COMM). This year too children wanted to save \$2 a week for one month from their weekly allowance to buy souvenirs at Knott's Berry Farm. CFP did not use the appropriate form to document safeguarding the cash resources of children. CFP has been trained to use the appropriate form. See Exhibit (C2): RECORD OF CLIENT'S /RESIDENTS SAFEGUARDED CASH RESOURCES-LIC405 FOR EXAMPLED. Also in future CFP will put each child's cash in a separate sealed envelope which will state the child's name on it and the amount the envelope contains. Each child will also sign the LIC 405-Record of Client's/Resident's Safeguarded Cash Resources. See Exhibit (C3): RECORD OF CLIENT'S /RESIDENTS SAFEGUARDED CASH RESOURCES-LIC405 FOR SERVICES CONTAINS (CONTAINS).

Certified Foster Parent has also signed an Affidavit of Understanding- stating
that the CFP is aware that the clients' allowances are not to purchase annual
passes to any park and will not be used for any other purposes. See Exhibit (C5):
AFFIDAVIT OF UNDERSTANDING

Field Exit Review #63: Both clients do not handle their allowance. It is 9 and of the sis 11.

### CORRECTIVE ACTION PLAN:

- As mentioned in the Exit Summary Response on 05/23/14, Homes of Hope is not clear as to the number of findings and which children they belong to. Homes of Hope need further clarification in order to respond to this finding.
- However, as mentioned in the Exit Summary Response on 05/23/14 for Week we have included a copy of the Life Skills Section of the last two Needs and Service Plans See Exhibit (G2): Electrocation NSP DATED 01/14/14 PAGE#11, and Exhibit (G3): Correct NSP DATED 04/14/14 PAGE#11. Child handles his own allowances as he wishes and this is discussed with him and is confirmed by the child during each weekly visit by the agency social worker that he has received his weekly allowance of \$5.00. See Exhibit (G4): WEEKLY PROGRESS SUMMARY DATED 04/30/14 AND 5/07/14.
- As mentioned in the Exit Summary Response on 05/23/14, (QCC) also handles his own allowance. For Liberation we have included a copy of the Life Skills Section of the last two Needs and Service Plans. See Exhibit (G5): UNION NSP DATED 01/14/14 PAGE#11, and Exhibit (G6): UNION NSP DATED 04/14/14 page#11. Child handles his own allowances as he wishes and this is discussed with him and is confirmed by the child during each weekly visit by the agency social worker that he has received his weekly allowance of \$5.00. See Exhibit (G7): WEEKLY PROGRESS SUMMARY DATED 04/30/14 AND 5/07/14.

Field Exit Review #64: Refuses to do a life book. Result CFP states he destroys his life book so she has him share his with his brother Whowever knows nothing about the life book and his brother was under the thought that he had his own book. Reserver Does not want to do a life book; says she signed paperwork stating such.

### CORRECTIVE ACTION PLAN:

 The Homes of Hope provides a Life Book to each child placed with the agency. This Life Book is given to the foster parent to be given to the child. During the weekly home visit the foster family agency social worker confirms that the child has received the life book and discusses the benefits of adding important and significant moments in their life book. If a child refuses to add to his/her life, then this is documented in the life book.

 On 06/20/14, certified foster parents will receive a mandatory training regarding the Life Book. Certified foster parents will be trained to maintain and update a life book on behalf of the child; in the event the child refuses to do his/her own life book and this will be documented in the weekly progress summary report by the agency social worker.

#### XI. PERSONNEL RECORDS

Field Exit Review #70: The following list of employees did not possess the correct education background for the jobs they were hired to perform: Agency subsequently received exception approval from CCL.

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#### **CORRECTIVE ACTION PLAN:**

- It is the policy of the Homes of Hope that any and all new hires meet the educational requirements as outlined in the job description of that employee. If any employee needs an exception from CCL then it is obtained prior to the employee starting the job. In the case of above mentioned employees, Homes of Hope failed to properly match the educational background with the educational requirement outlined in the job description. See Exhibit H1: ACCOUNTING JOB DESCRIPTION
- The Homes of Hope has obtained exceptions from CCL regarding COLORS, See Exhibit (H2): APPROVAL OF EXCEPTION FROM CCL, EXCEPTION FROM CCL.
- Homes of Hope will ensure that in future the personnel being hired by Homes of
  Hope will either meet the education/experience requirements for the positions
  they are hired for OR when applicable will obtain CCL exception approval
  before the start date of such personnel.

Field Exit Review #72: Complete Field only has a identification card in the file, no DL included nor any documentation in file that employee does not drive. Spoke with Conference and Complete on 5/16/14 at Exit Conference and they verbally stated the Macron doe not drive at all.

#### **CORRECTIVE ACTION PLAN:**

As mentioned in the Exit Summary Response dated 05/23/14, for Comment of the Job as Archive Office Assistant. See Exhibit (H6): JOB DESCRIPTION FOR ARCHIVE OFFICE ASSISTANT.

Field Exit Review #73: Several employee files did not include completed Policy and Procedure forms as the agency's authorized personnel signatures were missing from the forms. Administrative staff went through files and signed folders during review.

CORRECTIVE ACTION PLAN:

• In the past Policy and Procedure forms were printed with the agency authorized personnel counter signatures in addition to the signatures of the employee. The Homes of Hope has realized that it is not necessary for the agency authorized personnel to counter sign the Policy and Procedure forms. Effective July 1, 2014, Policy and Procedure forms will no longer require the counter signature of the agency authorized personnel.

If any further information is needed, please contact me anytime at (626) 814-9085.

PLO

Thanks.

Sincerely,

Pritpal Sidhu PhD Administrator

Homes of Hope Foster Family Agency

Ph: (626) 814-9085 Fax: (626) 814-2276

Email: hohadmin@verizon.net